

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??:

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?:

Number of copies of CRF::

Title:: VOICE-ACTIVATED PROGRAMMABLE REMOTE
CONTROL

Attorney Docket Number:: 000291-010210US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name::
Family Name:: Grossmeyer
Name Suffix::
City of Residence:: Cedarburg
State or Province of Residence:: WI
Country of Residence:: US
Street of Mailing Address:: West 68 North 328 Palmetto Court
City of Mailing Address:: Cedarburg
State or Province of mailing address:: WI
Country of mailing address::
Postal or Zip Code of mailing address:: 53012

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michael
Middle Name::
Family Name:: Hitchcock
Name Suffix::
City of Residence:: Sequim
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 6180 Woodcock Road
City of Mailing Address:: Sequim
State or Province of mailing address:: WA

Country of mailing address::

Postal or Zip Code of mailing address:: 98382

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	non-provisional application of	60/439,265	01/10/03

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::